

# SPECIAL EVENT LICENSE APPLICATION AND FOOD REVIEW CHECKLIST

*Please review the following information, and note the requested information on the Special Event License Application and the Food & Equipment Review forms.*

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**Completed SPECIAL EVENT LICENSE APPLICATION form**

If you are applying for an **Annual Special Event license**, note that **additional events** may be added to your license after approval with no additional fee **only** if you notify the Environmental Health Section at least seven (7) days before the start of the event. If you are making ANY **menu changes**, a new application must be submitted with an additional application fee.

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**Business/Organization name and address** provided, along with the ethnic group name you are representing.

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**Name and phone number of contact person** who is knowledgeable about the food and beverage items to be served provided.

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**Event date(s), name(s) and location of booth/stand.**

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**Minnesota Tax Identification Number** information.

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**Certification of Workers' Compensation** coverage.

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**Non-Profit Organizations:** Attach proof of non-profit status, with a copy of one of the following:  
State Tax-Exempt Status Form    Federal Form # 501c(3)    Non-Profit articles of Incorporation  
Proof that license is for an event for the benefit of a non-profit organization (Federal Form 990 or 990T)

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**Payment is attached.** (cash, check or credit card)

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**Application is signed.**

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**Completed Food & Equipment Review form** (Attach to special event license application)

Name of menu item to be served, along with ingredient items, noting approved food source name/address. **NO HOME PREPARED FOODS ARE PERMITTED.** All food equipment listed, along with the number of units provided to keep cold food cold, to heat food, and to keep hot food hot (e.g. 2 domestic refrigerators, 1 chest freezer, 1 stove/oven, 1 three-well steam table, 2 microwave ovens,....). Also indicate the type of facilities provided for hand washing and how liquid and solid wastes are to be disposed of.

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**Reviewed "Guidelines for Temporary Food Operations" information**

License holder is responsible for informing every employee about these guidelines and insuring that employees follow these guidelines.

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**Provided a diagram of the food booth/stand on the "Temporary Food Service Booth Layout" form.** (Attach to special event license application)

Indicate booth size and location of equipment. Make sure to identify individual pieces of equipment, furniture, shelving, etc. on the diagram.

## LICENSE DEFINITIONS

### Special event food sales - 1 to 3 days:

A license for a food establishment at a special event, where the food operations are restricted to the menu items, food preparation methods and equipment that have been submitted to the DSI office with the application and approved by the Environmental Health Section . Any change in menu items, food preparation methods and/or equipment will require approval by the Environmental Health Section prior to the event. This license is valid for only one event that does not exceed three (3) consecutive days.

### Special event food sales - 4 to 14 days:

A license for a food establishment at a special event, where the food operations are restricted to the menu items, food preparation methods and equipment that have been submitted to the DSI office with the application and approved by the Environmental Health Section . Any change in menu items, food preparation methods and/or equipment will require approval by the Environmental Health Section prior to the event. This license is valid for only one event that is at least four (4) and not more than fourteen (14) consecutive days.

### Special event food sales - Annual:

A license for a food establishment participating in an unlimited number of special events within a twelve-month period, where the food operations are restricted to the menu items, food preparation methods and equipment that have been submitted to the DSI office with the application and approved by the Environmental Health Section . At the time of application, all events to be participated in during the upcoming twelve-months must be listed. Any change in the events listed on the original application shall be submitted in writing to the Environmental Health Section for approval, a minimum of seven (7) days prior to the event. Any change in menu during the twelve-month license period will require submission of a new license application fee.

### Special event food sales - Nonprofit:

A nonprofit organization selling food in conjunction with a special event where the food operations are restricted to the menu items, food preparation methods and equipment that have been submitted to the DSI office with the application and approved by the Environmental Health Section . Any change in menu items, food preparation methods and/or equipment shall require approval by the Environmental Health Section prior to the event. This license is valid for only one event that does not exceed fourteen (14) consecutive days.

### Retail food establishment - Temporary:

A temporary establishment where food sales are restricted to prepackaged non-potentially hazardous foods or nonalcoholic beverages; operating no more than fourteen (14) days annually at any one location.

### Special event food sales - Extension:

A license for a restaurant to extend food sales in conjunction with a special event to areas contiguous to the restaurant, and where the food operations are restricted to the menu items, food preparation methods and equipment that have been submitted to the DSI office with the application and approved by the Environmental Health Section. Any change in menu items, food preparation methods and/or equipment will require approval by the Environmental Health Section prior to the event. This license is valid for only one event that does not exceed fourteen (14) consecutive days.

### Food give-away:

An individual or organization distributing food products at no charge. Food operations are restricted to the items, food preparation methods and equipment that have been submitted to the DSI office with the application and approved by the Environmental Health Section. Any change in menu items, food preparation methods and/or equipment will require approval by the Environmental Health Section prior to the give-away. This license is valid for only one give-away that does not exceed three (3) consecutive days.

### Customer appreciation - Food sales:

A license to sell food in conjunction with a business customer appreciation event, where the food operations are restricted to the menu items, food preparation methods and equipment that have been submitted to the DSI office with the application and approved by the Environmental Health Section . Any change in menu items, food preparation methods and/or equipment will require approval by the Environmental Health Section prior to the event. Food sales are limited to the building in which the business is located or exterior areas contiguous to the building. This license is valid for only one event that does not exceed three (3) consecutive days. A business is limited to not more than two (2) such events within a twelve-month period.

### Retail food establishment - Temporary - Beverage only:

A temporary establishment where food sales are restricted to canned or bottled nonalcoholic beverages, operating no more than (14) days annually at any one location.



CITY OF SAINT PAUL  
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220  
Saint Paul, Minnesota 55101-1806

Telephone: 651-266-9090  
Facsimile: 651-266-9124  
Web: www.stpaul.gov/dsi

**SPECIAL EVENT LICENSE APPLICATION**  
**THIS APPLICATION IS SUBJECT TO REVIEW BY THE PUBLIC**  
**PLEASE TYPE OR PRINT IN INK**

Welcome to the City of Saint Paul! Saint Paul is proud of the wide variety of festivals held within the City each year. We welcome your participation in these events that help us celebrate our diversity. The following table lists the types of temporary licenses available. (See the "Special Event License Application & Food Review Checklist" for license definitions.)

**Type of License being applied for (circle one):**

Special Event 1-3 Days (1 event only)	Special Event (4-14 days) (1 event only)	Special Event Annual	Non-Profit Organization	Retail Food Establishment Temporary	Special Event Food Sales Extension	Food Giveaway	Customer Appreciation Food Sales	Retail Food Beverage Only (No Alcohol)
\$190.00	\$217.00	\$272.00	\$55.00	\$65.00	\$109.00	\$55.00	\$55.00	\$5.00

\*Please note: Applicants must obtain the approval of event organizers prior to application if they wish to operate at an event that has a block party. Vendors can not operate within 2000 feet (approximately 5 blocks) of an event where a block party permit has been obtained without permission of the event organizer.

**Any person making application less than three (3) calendar days before an event, will be assessed an additional \$27.00 late fee. Emergency or On-site (at the event location) applications will be assessed an additional \$55.00 penalty fee.**

Business/Organization Name: \_\_\_\_\_

Business/Organization Address: \_\_\_\_\_

Mail-To Address: \_\_\_\_\_

Contact Name and Phone Number: \_\_\_\_\_

<u>Event Date(s)</u>	<u>Event Name(s)</u>	<u>Stand Location(s) and Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

MINNESOTA TAX IDENTIFICATION NUMBER – Pursuant to the Laws of Minnesota, 2005, Chapter 151, Article 1, Section 117 (270C.72) (Tax Clearance; Issuance of Licenses), licensing authorities are required to provide to the State of Minnesota Commissioner of Revenue, the Minnesota business tax identification number and the social security number of each license applicant. Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of the **Minnesota Tax Identification Number**:

- This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales, employer's withholding or motor vehicle excise taxes;
- Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service.

Minnesota Tax Identification Numbers (Sales & Use Tax Number) may be obtained from the State of Minnesota, Business Records Department, 600 Robert Street North, Saint Paul, MN (651-296-6181).

Minnesota Tax Identification Number / Tax Exemption Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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If a Minnesota Tax Identification Number is not required for the business being operated, indicate so by placing an "X" in the box.

**CERTIFICATION OF WORKERS' COMPENSATION COVERAGE PURSUANT TO MINNESOTA STATUTE 176.182**

I hereby certify that I, or my company, am in compliance with the workers' compensation insurance coverage requirements of Minnesota Statute 176.182, subdivision 2. I also understand that provision of false information in this certification constitutes sufficient grounds for adverse action against all licenses held, including revocation and suspension of said licenses:

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Coverage from: \_\_\_\_\_ To: \_\_\_\_\_

I have no employees covered under workers' compensation insurance \_\_\_\_\_ (Initials)

(Continued on back)

**ANY FALSIFICATION OF ANSWERS GIVEN OR MATERIAL SUBMITTED  
WILL RESULT IN DENIAL OF THIS APPLICATION**

I hereby state that I have answered all of the preceding questions, and that the information contained herein and on the Environmental Food and Equipment Review Form is true and correct to the best of my knowledge and belief. I also understand this premise may be inspected by police, fire, health and other city officials at any and all times when the business is in operation. In addition, I have reviewed and agree to follow, the Environmental Health **"Guidelines for Temporary Food Operations"** that I have been given as part of this application.



\_\_\_\_\_  
Signature (REQUIRED for all applications)

\_\_\_\_\_  
Date

We will accept payment by cash, check (made payable to City of Saint Paul) or credit card.

**NO CHECKS WILL BE ACCEPTED LESS THAN EIGHT (8) CALENDAR DAYS BEFORE THE EVENT.**

**To annual applicants:** If you plan to operate at **multiple events** during the year with the **same menu**, additional events may be added to your license after approval with no additional fee **only** if you notify the Environmental Health Section **at least seven (7) days before the start of the event**. Should there be any changes in your menu, a new application must be submitted with an additional application fee.

**To non-profit organizations:** Attach proof of non-profit status. A copy of one of the following:

State Tax-Exempt Status Form

Federal Form #501C3

Federal Form 990 or 990T (front page)

Non-Profit Articles of Incorporation

Proof that license use is for an event for the benefit of a non-profit organization

**APPLICATION INSTRUCTIONS:**

Applications can be reviewed, approved, and processed in any of the following ways:

**IN PERSON**

You can complete this application at our office located at 375 Jackson Street, Suite 220, (Skyway Level) in Saint Paul between the hours of 7:30 am - 4:30 pm, Monday through Friday.

**BY APPOINTMENT**

Contact Barbara McMonigal-St.Dennis, Environmental Health Specialist II, at (651) 266-9137 to schedule an appointment.

**BY MAIL**

Your application can be mailed with the appropriate payment enclosed to the Department of Safety and Inspections, 375 Jackson Street, Suite 220, Saint Paul, Minnesota 55101-1806, Attention: Barbara McMonigal-St.Dennis.

**BY FAX**

Fax your application to (651) 266-9124, Attention: Barbara McMonigal-St.Dennis, then immediately mail your payment to the Department of Safety and Inspections, 375 Jackson Street, Suite 220, Saint Paul, Minnesota 55101-1806, Attention: Barbara McMonigal-St.Dennis.

**IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION:**

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American Express

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Discover

☐

MasterCard

☐

Visa

EXPIRATION DATE:

ACCOUNT NUMBER:

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\_\_\_\_\_  
Name of Cardholder (please print)

\_\_\_\_\_  
Signature of Card Holder (required for all charges)

\_\_\_\_\_  
Date

**Food & Equipment Review**-The following information must be submitted with the license application for review by the DSI Env. Health. (Instructions on back)

1. Name and Ingredients of Food/Beverage to be served	2. Food Source (Name & Address)	3. Method of Transportation (Vehicle, refrigeration, insulated containers, etc.)	4. Food Preparation Site (Name & Address)	5. On-site Equipment (Label & indicate location on diagram)

6. Type of Condiments: \_\_\_\_\_

7. Type of Hair Restraint: \_\_\_\_\_

8. Type of Overhead Protection: \_\_\_\_\_

9. Type of Sanitizer: \_\_\_\_\_

10. Dish & Utensil Washing: \_\_\_\_\_ on-site washing or \_\_\_\_\_ washing done when returned to licensed facility (see “Guidelines for temporary food operations” for on-site utensil washing)

Organization Name: \_\_\_\_\_ Address: \_\_\_\_\_ Date: \_\_\_\_\_

## Instructions for completing Food & Equipment Review Form

### 1. Name and Ingredients of Food/Beverage to be served

Provide the name(s) of all menu item(s) and the ingredients used to make each item. Any change in menu items must be submitted to the DSI office in writing for approval a minimum of seven (7) days prior to the event. For ***Special event food sales – Annual*** licenses, any change in menu during the twelve-month license period shall require submission of a new license application and license fee.

### 2. Food Source

List the name and address of the sources of all food items. All food products must be from approved sources such as commercially prepared foods or foods prepared at a licensed approved kitchen. All meats must be United States Department of Agriculture (USDA) inspected. No home prepared foods are permitted.

### 3. Method of Transportation and Refrigeration

Describe and/or list all vehicles and equipment that will be used to transport food items including equipment and methods used to maintain foods cold or hot.

### 4. Food Preparation Site

List the name and address of all locations where food items are going to be stored or prepared prior to delivery to the temporary food booth.

### 5. On-Site Equipment

List all major pieces of equipment that will be used at the food booth for food handling, preparation and storage. Examples are refrigerators, freezers, ovens, microwave ovens, steam tables, electric rosters, deep fryers, etc. Also indicate the type of facilities provided for handwashing and how liquid and solid wastes are to be disposed of.

### 6. Condiments

List the condiments to be provided for customers and how they will be dispensed. (Packets, Squeeze Bottles, Pump Dispensers, etc.)

### 7. Hair Restraint

**Hair restraints** (hair nets, caps, etc.) **are required** of all employees handling food and clean equipment/utensils. Indicate the type of hair restraints to be used.

### 8. Overhead Protection

When a stand is located outdoors, the **stand must have a covered roof, canopy or other type of approved covering.** The covering must provide protection from adverse weather, birds, or other sources of overhead contamination. If the covering should fail, all food activities must cease until adequate protection is provided.

### 9. Type of sanitizer

List the type(s) of sanitizer to be used for utensil washing and wiping cloths. (e.g. bleach + water solution, quaternary ammonium solution)

### 10. Dish & Utensil Washing

Indicate if utensils are washed on-site or if they will be taken to a licensed food establishment to be cleaned and sanitized. See “**Guidelines for temporary food operations**” for on-site utensil washing requirements.

# GUIDELINES FOR TEMPORARY FOOD OPERATIONS

## THESE GUIDELINES MUST BE POSTED WITH YOUR LICENSE

The license holder is responsible for informing every employee about these guidelines and insuring that employees follow these guidelines.

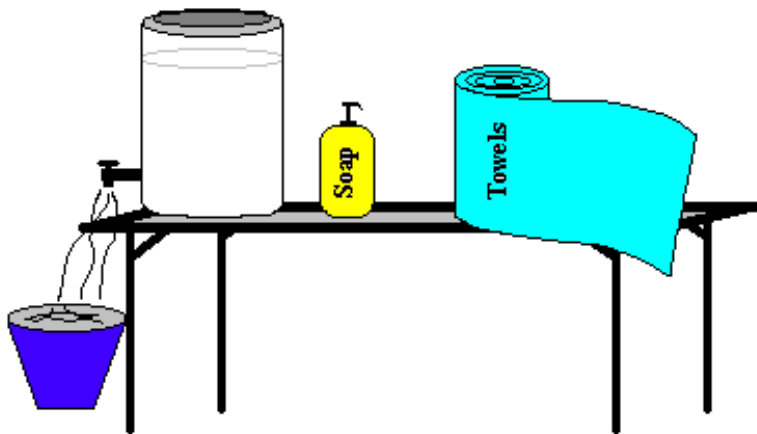
1. **Keep** potentially hazardous **cold foods** at **41° F.** or colder.
2. **Keep** potentially hazardous **hot foods** at **140° F.** or hotter. No Sterno or heat lamps are permitted for maintaining foods.
3. **Reheat** all foods to **165° F.** or hotter.
4. **Check food temperatures** frequently with an accurate stem thermometer (scaled 0° – 220° F).
5. **Do not store** potentially hazardous foods **at room temperature.**
6. **Thaw** potentially hazardous foods **in refrigerator or insulated cooler.**
7. All potentially hazardous food products should be **transported in refrigerated trucks or sufficient thermal containers.** When transporting cold foods in containers, provide dry ice or synthetic “BLUE” ice packs. **No wet ice** is permitted for food storage; however, it may be used for canned soda storage.
8. **Store** all food & utensils **off the ground.**
9. A **sanitizer solution must be used.** Provide a bleach and water sanitizing solution (1 cap full of bleach in a labeled, spray bottle).
10. **Wear a hair restraint** (i.e. ball cap, visor, or hair net...).
11. **Wash hands** often and thoroughly. Provide some type of handwashing station. (This includes an insulated beverage container with spigot and warm water, hand soap, paper towels and a bucket to catch the dirty water.)
12. **Do not smoke** inside food stand.
13. Any hot **cooking equipment or unprotected foods** must be **located in the back of the booth.**

## FIRE PREVENTION SAFETY REQUIREMENTS

The following are fire safety requirements for food booths/vehicles.

NOTE: Disregard these regulations if no cooking is being conducted in your booth/vehicle.

- 1) **Provide a fire extinguisher** with at least a 2A10BC rating for each booth/vehicle.
- 2) **Propane** must be **installed in accordance with all applicable codes** (i.e. secured, gas shut-off provided, piping must be free of trip hazards, etc.)
- 3) **Maintain** at least **three feet of clearance** between **cooking equipment and combustibles**.
- 4) All **pressurized cylinders must be secured** in the **upright position** to prevent tipping.
- 5) **Electrical cords** shall be **in good condition** without splices, deterioration, or damage.
- 6) If you have **any further questions**, please contact, City of Saint Paul Fire Department, **Fire Prevention Section** at (651) 228-6230.

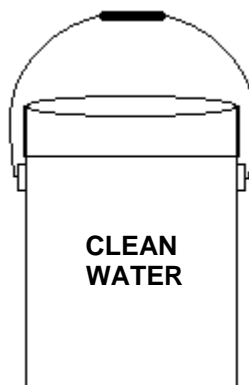
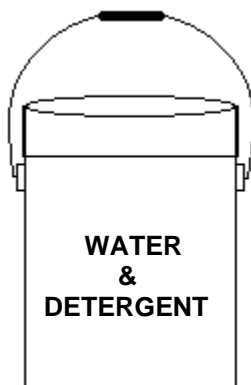


## MINIMUM HANDWASHING STATION REQUIREMENTS

The hand washing station below is the **minimum** required for a special event food stand. Based on the design and layout of the stand and the foods being prepared and served, the Environmental Health Director may require a hand washing station that is different than the one indicated.

## MINIMUM UTENSIL WASHING STATION REQUIREMENTS

The utensil washing station below is the **minimum** required for a special event food stand. Based on the design and layout of the stand and the foods being prepared and served the Environmental Health Director may require a utensil washing station that is different than the one indicated.



**Sanitizer Strength (Bleach)**  
**100 - 200 Part Per Million**  
(Capful Bleach Per Gal of Water)





## Temporary Food Service Booth Layout

375 Jackson Street, Suite 220  
Saint Paul, Minnesota 55101-1806

**Telephone:** 651-266-9090  
**Facsimile:** 651-266-9124  
**Web:** [www.stpaul.gov/dsi](http://www.stpaul.gov/dsi)

Date:\_\_\_\_\_

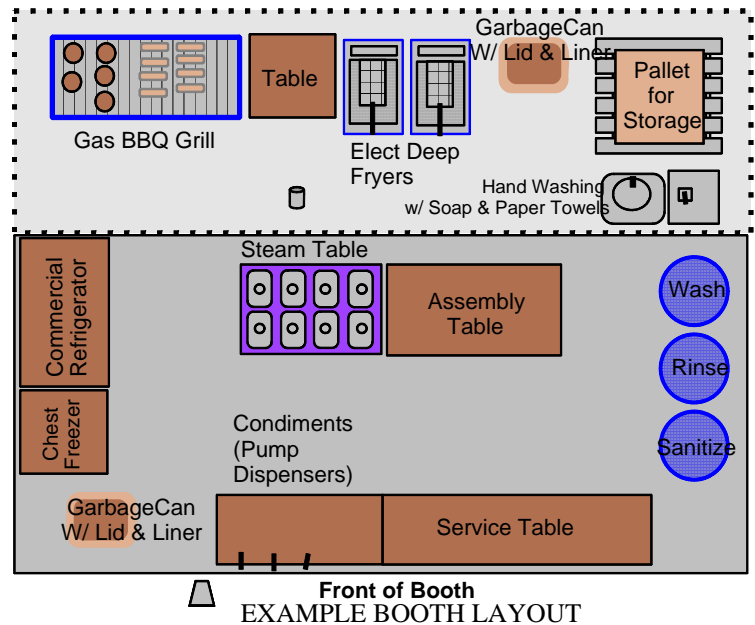
Vendor Name

Address

City	State	Zip
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Provide a diagram of your proposed booth below. Show and label each piece of equipment and indicate the overall size of the space to be used.

Overall Size of Booth : \_\_\_\_\_ ft. X \_\_\_\_\_ ft.

[illegible]

# Certificate of Compliance

## Minnesota Workers' Compensation Law

PRINT IN INK or TYPE.

Minnesota Statutes, Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in any activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minnesota Statutes, Chapter 176. The required workers' compensation insurance information is the name of the insurance company, the policy number, and the dates of coverage, or the permit to self-insure. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

**A valid workers' compensation policy must be kept in effect at all times by employers as required by law.**

BUSINESS NAME (Individual name only if no company name used)	LICENSE OR PERMIT NO (if applicable)
DBA (doing business as name) (if applicable)	

BUSINESS ADDRESS (PO Box must include street address)	CITY	STATE	ZIP CODE
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**YOUR LICENSE OR CERTIFICATE WILL NOT BE ISSUED WITHOUT THE FOLLOWING INFORMATION. You must complete number 1, 2 or 3 below.**

### NUMBER 1 COMPLETE THIS PORTION IF YOU ARE INSURED:

INSURANCE COMPANY NAME (not the insurance agent)		
WORKERS' COMPENSATION INSURANCE POLICY NO.	EFFECTIVE DATE	EXPIRATION DATE

### NUMBER 2 COMPLETE THIS PORTION IF SELF-INSURED:

<input type="checkbox"/> I have attached a copy of the permit to self-insure.
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### NUMBER 3 COMPLETE THIS PORTION IF EXEMPT:

I am not required to have workers' compensation insurance coverage because:

- ☐ I have no employees.
- ☐ I have employees but they are not covered by the workers' compensation law. (See Minn. Stat. § 176.041 for a list of excluded employees.) Explain why your employees are not covered: .
- ☐ Other: .

### ALL APPLICANTS COMPLETE THIS PORTION:

I certify that the information provided on this form is accurate and complete. If I am signing on behalf of a business, I certify that I am authorized to sign on behalf of the business.

APPLICANT SIGNATURE (mandatory)	TITLE	DATE
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**NOTE: If your Workers' Compensation policy is cancelled within the license or permit period, you must notify the agency who issued the license or permit by resubmitting this form.**

This material can be made available in different forms, such as large print, Braille or on a tape. To request, call 1-800-342-5354 (DIAL-DLI) Voice or TDD (651) 297-4198.